Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

Art Unit 1792 Examiner Katherine A. Bareford  This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):    Fee   Small Entity Fee     One month (37 CFR 1.17(a)(1))   \$120   \$60   \$5     Two months (37 CFR 1.17(a)(2))   \$460   \$230   \$5     Two months (37 CFR 1.17(a)(3))   \$1050   \$525   \$5     Three months (37 CFR 1.17(a)(4))   \$1640   \$820   \$5     Four months (37 CFR 1.17(a)(5))   \$2230   \$1115   \$5     Applicant claims small entity status. See 37 CFR 1.27.   A check in the amount of the fee is enclosed.    Payment by credit card.   The Director has already been authorized to charge fees in this application to a Deposit Account.   The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-0988   1 have enclosed a duplicate copy of this sheet.  WARNING: information on this form may become public. Credit card information should not be included on this form.  Provide credit card information and authorization on PTO-2038.  I am the   applicant/inventor.   assignee of record of the entire interest. See 37 CFR 3.71.    Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).   attorney or agent of record. Registration Number 35,047   attorney or agent of record ack gistration number in a facing under 37 CFR 1.34.   Registration number if acking under 37	PETITION	FOR EXTENSION OF TIME UNDER 37	Docket Number (Optional)			
Application Number 10/606,460 Filed 06/26/03  For AQUEOUS ACIDIC IMMERSION PLATING SOLUTIONS AND METHODS FOR PLATING  Art Unit 1792 Examiner Katherine A. Bareford  This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee  One month (37 CFR 1.17(a)(1)) \$120 \$80 \$  Two months (37 CFR 1.17(a)(2)) \$460 \$230 \$  Three months (37 CFR 1.17(a)(3)) \$1050 \$525 \$  1050.00  Four months (37 CFR 1.17(a)(4)) \$1640 \$820 \$  Five months (37 CFR 1.17(a)(4)) \$2230 \$11115 \$  Applicant claims small entity status. See 37 CFR 1.27.  A check in the amount of the fee is enclosed.  Payment by credit card.  The Director has already been authorized to charge fees in this application to a Deposit Account.  The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-0988 In have enclosed a duplicate copy of this sheet.  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  I am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34.  Signature Thomas W. Adams  7 Jeephone Number  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(c) are required. Submit multiple forms if more than one signature to required, see below.				ATOTP0104US		
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The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):    Fee	Art Unit 17	792	Examiner Katherine A. Bareford			
One month (37 CFR 1.17(a)(1)) \$120 \$60 \$   S     Two months (37 CFR 1.17(a)(2)) \$460 \$230 \$   S     Three months (37 CFR 1.17(a)(3)) \$1050 \$525 \$ \$1050.00     Three months (37 CFR 1.17(a)(4)) \$1640 \$820 \$   S     Four months (37 CFR 1.17(a)(4)) \$1640 \$820 \$   S     Five months (37 CFR 1.17(a)(5)) \$2230 \$1115 \$   S     Applicant claims small entity status. See 37 CFR 1.27.   A check in the amount of the fee is enclosed.   Payment by credit card.   The Director has already been authorized to charge fees in this application to a Deposit Account.   The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-0988   I have enclosed a duplicate copy of this sheet.   WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on Pro-2935.   I am the	This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
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Four months (37 CFR 1.17(a)(4)) \$1640 \$820 \$		Two months (37 CFR 1.17(a)(2))	\$460	\$230		
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The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-0998 . I have enclosed a duplicate copy of this sheet.  WARNING: Information on this form may become public Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  I am the	Payment by credit card.					
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Typed or printed name Telephone Number  NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	Signature			Date		
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This collection of information is required by 37 CFR 1.138(a). The information is required to obtain or retain a benefit by the public which is to the (and by the USFYTO by process) an application. Confidentially is governed by 50 U.S. C. 122 and 37 CFR 1.11 and 1.1. This collection is estimated to take of minutes to complete, including gathering, preparing, and submitting the completed application form to the USFYTO. Time will vary depending upon the Individual case. Any comments not the amount of time you require to complete this form and/or supportions for reducing this surface, should be sent to the Chief Information Officer, U.S. Pattert and Tradema's Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patterts, P.O. Dos 1450, Desarding-rib, VA 22313-1450.